

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

SECRETARY OF THE SENATE  
10 APR 15 PM 12:45

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

FIORINA VICTORY COMMITTEE

ADDRESS (number and street) PO BOX 365

Check if different than previously reported. (ACC)

MCLEAN VA 22101

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

January 31 Quarterly Report(YE)

July 31 Mid-Year Report(Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12G)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day Post-Election Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2010 through 03 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer CABELL HOBBS

Signature of Treasurer *[Handwritten Signature]* Date 04 15 2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only

**FEC FORM 3X**  
(Rev. 12/2004)

10020200074

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
FIORINA VICTORY COMMITTEE

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	1	0									
0.00												
0.00												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%;"><tr><td>116700.00</td></tr></table>	116700.00	<table border="1" style="width: 100%;"><tr><td>116700.00</td></tr></table>	116700.00								
116700.00												
116700.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%;"><tr><td>116700.00</td></tr></table>	116700.00	<table border="1" style="width: 100%;"><tr><td>116700.00</td></tr></table>	116700.00								
116700.00												
116700.00												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%;"><tr><td>93583.80</td></tr></table>	93583.80	<table border="1" style="width: 100%;"><tr><td>93583.80</td></tr></table>	93583.80								
93583.80												
93583.80												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%;"><tr><td>23116.20</td></tr></table>	23116.20	<table border="1" style="width: 100%;"><tr><td>23116.20</td></tr></table>	23116.20								
23116.20												
23116.20												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

10020200075

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name  
FIORINA VICTORY COMMITTEE

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	W	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	W	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	116700.00	116700.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	116700.00	116700.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	116700.00	116700.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	116700.00	116700.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	116700.00	116700.00

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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<b>II. DISBURSEMENTS</b>		<b>COLUMN A</b>	<b>COLUMN B</b>
		<b>Total This Period</b>	<b>Calendar Year-to-Date</b>
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....		0.00	0.00
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		5583.80	5583.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		5583.80	5583.80
22. Transfers to Affiliated/Other Party Committees.....		88000.00	88000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		0.00	0.00
24. Independent Expenditure (use Schedule E).....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees.....		0.00	0.00
(b) Political Party Committees.....		0.00	0.00
(c) Other Political Committees (such as PACs).....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		0.00	0.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share.....		0.00	0.00
(ii) "Levin" Share.....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		93583.80	93583.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		93583.80	93583.80

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**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	116700.00	116700.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	116700.00	116700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5583.80	5583.80
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5583.80	5583.80

FE6AN026

10020200078

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 10

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
FIORINA VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Barbara R. Banke

Mailing Address 1045 Alexander Mountain Road

City State Zip Code  
Geyserville CA 95441

FEC ID number of contributing federal political committee.

C

Name of Employer  
Jackson Family Enterprises

Occupation  
Co-Proprietor

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

30400.00

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2010

Transaction ID: SA11AI.4118

Amount of Each Receipt this Period

30400.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Jess S. Jackson

Mailing Address 1045 Alexander Mountain Road

City State Zip Code  
Geyserville CA 95441

FEC ID number of contributing federal political committee.

C

Name of Employer  
Jackson Family Enterprises

Occupation  
Proprietor

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

30400.00

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2010

Transaction ID: SA11AI.4116

Amount of Each Receipt this Period

30400.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John A. Moran

Mailing Address 125 Worth Avenue

City State Zip Code  
Palm Beach FL 33480

FEC ID number of contributing federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
03 / 15 / 2010

Transaction ID: SA11AI.4108

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

65800.00

TOTAL This Period (last page this line number only) .....

10020200079



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 10

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
FIORINA VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Lisa Wilcox-Cassidy

Mailing Address PO Box 3535

City

Rancho Sante Fe

State

CA

Zip Code

92062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2010

Transaction ID: SA11AI.4114

Amount of Each Receipt this Period

10000.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

10000.00

TOTAL This Period (last page this line number only) .....

116700.00

10020200081

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 9 / 10
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)  
FIORINA VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) COMPLIANCE CONSULTING LLC	Transaction ID: SB21B.4126
	Mailing Address PO BOX 365	Date of Disbursement 03 / 17 / 2010
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement COMPLIANCE CONSULTING	Candidate Name	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 001
State: District:		

B.	Full Name (Last, First, Middle Initial) CONTINENTAL CATERING AT VILLAGE GREEN	Transaction ID: SB21B.4124
	Mailing Address 951 US HWY 1	Date of Disbursement 03 / 24 / 2010
City NORTH PALM BEACH	State FL	Zip Code 33408
Purpose of Disbursement CATERING	Candidate Name	Amount of Each Disbursement this Period 3583.80
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 003
State: District:		

C.	Full Name (Last, First, Middle Initial) THE WOODS HERBERGER GROUP	Transaction ID: SB21B.4128
	Mailing Address 4027 SOUTH LEJEUNE ROAD	Date of Disbursement 03 / 24 / 2010
City CORAL GABLES	State FL	Zip Code 33146
Purpose of Disbursement FUNDRAISING CONSULTING	Candidate Name	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 003
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	5583.80
TOTAL This Period (last page this line number only) .....	5583.80

10020200082

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 10

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FIORINA VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CARLY FOR CALIFORNIA, INC</b>		Transaction ID: SB22.4122 Date of Disbursement 03 / 31 / 2010	
Mailing Address 455 CAPITOL MALL SUITE 801		Amount of Each Disbursement this Period 3000.00	
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement TRANSFER-NET JFC PROCEEDS	008 Category/ Type	
Candidate Name CARLY FIORINA	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 00			

Full Name (Last, First, Middle Initial) <b>B. CARLY FOR CALIFORNIA, INC</b>		Transaction ID: SB22.4123 Date of Disbursement 03 / 31 / 2010	
Mailing Address 455 CAPITOL MALL SUITE 801		Amount of Each Disbursement this Period 10000.00	
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement TRANSFER-NET JFC PROCEEDS	008 Category/ Type	
Candidate Name CARLY FIORINA	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 00			

Full Name (Last, First, Middle Initial) <b>C. NATIONAL REPUBLICAN SENATORIAL COMMITTEE</b>		Transaction ID: SB22.4120 Date of Disbursement 03 / 31 / 2010	
Mailing Address 425 SECOND STREET NE		Amount of Each Disbursement this Period 75000.00	
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement TRANSFER-NET JFC PROCEEDS	008 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:			

SUBTOTAL of Disbursements This Page (optional) .....	88000.00
TOTAL This Period (last page this line number only) .....	88000.00

10020200083

NANCY ERICKSON  
SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT

HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7116  
PHONE: (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 04-15-10  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

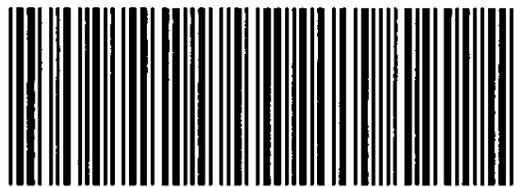
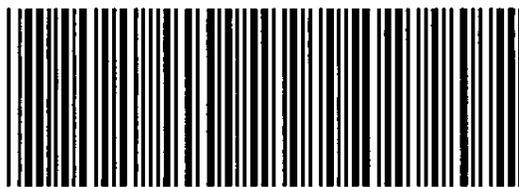
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 04-15-10

10020200084



10020200085